### Case 17-11374 Doc 1 Filed 04/11/17 Entered 04/11/17 09:32:46 Desc Main Document Page 1 of 46

| Fill in this information to identify your case: |                                 |                                 |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                                 |                                 |
| NORTHERN DISTRICT OF ILLINOIS                   | _                               |                                 |
| Case number (if known)                          | _ Chapter you are filing under: |                                 |
|   | ■ Chapter 7                     |                                 |
|   | ☐ Chapter 11                    |                                 |
|   | ☐ Chapter 12                    |                                 |
|   | ☐ Chapter 13                    | Check if this an amended filing |

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

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The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself   |  |   |   |
|-----|--|--|---|---|
|     |  | About Debtor 1:                          |   | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.  | Your full name   |  |   |   |
|     | Write the name that is on  | Geraldine                                |   |   |
|     | your government-issued picture identification (for example, your driver's license or passport).  Bring your picture              | First name                               |   | First name                                    |
|     |  | Middle name                              |   | Middle name                                   |
|     |  | Hendricks-Mcccan                         |   |   |
|     | identification to your meeting with the trustee.   | Last name and Suffix (Sr., Jr., II, III) | _ | Last name and Suffix (Sr., Jr., II, III)      |
|     |  |  |   |   |
| 2.  | All other names you have used in the last 8 years  | Geraldine Hendricks<br>Geraldine Mccan   |   |   |
|     | Include your married or maiden names.  | Geraldine Hemingay                       |   |   |
| 3.  | Only the last 4 digits of<br>your Social Security<br>number or federal<br>Individual Taxpayer<br>Identification number<br>(ITIN) | xxx-xx-5939                              |   |   |

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Debtor 1 Geraldine Hendricks-Mcccan

|  |   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |
|--|---|---|--|
| 4. Any business names and<br>Employer Identification<br>Numbers (EIN) you have<br>used in the last 8 years |   | ■ I have not used any business name or EINs.  | ☐ I have not used any business name or EINs.   |
|  | Include trade names and doing business as names | Business name(s)  | Business name(s)   |
|  |   | EINs  | EINs   |
| 5.   | Where you live                                  |   | If Debtor 2 lives at a different address:  |
|  |   | 15962 S Park Ave South Holland, IL 60473  Number, Street, City, State & ZIP Code  | Number, Street, City, State & ZIP Code   |
|  |   | <b>Cook</b> County  | County   |
|  |   | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
|  |   | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code   |
| 6.   | Why you are choosing this district to file for  | Check one:  | Check one:   |
|  | bankruptcy                                      | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                       |
|  |   | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)   |
|  |   |   |  |

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Debtor 1 Geraldine Hendricks-Mcccan

| about how you may pay. Typically, if you are paying the fee your order. If your attorney is submitting your payment on your beha a pre-printed address.    need to pay the fee in installments. If you choose this option the filing Fee in Installments (Official Form 103A).     request that my fee be waived (You may request this option but is not required to, waive your fee, and may do so only if you applies to your family size and you are unable to pay the fee in the Application to Have the Chapter 7 Filing Fee Waived (Offion Pankruptcy within the last 8 years?   | ck with the clerk's office in your local court for more details burself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with on, sign and attach the <i>Application for Individuals to Pay</i> on only if you are filing for Chapter 7. By law, a judge may, bur income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out |
|--|---|
| Chapter 7  Chapter 11  Chapter 12  Chapter 13  I will pay the entire fee when I file my petition. Please cherabout how you may pay. Typically, if you are paying the fee yorder. If your attorney is submitting your payment on your behap re-printed address.  I need to pay the fee in installments. If you choose this option to put is not required to, waive your fee, and may do so only if you applies to your family size and you are unable to pay the fee in the Application to Have the Chapter 7 Filing Fee Waived (Office Isate)  No.  Sistrict  District  When  District  When  District  When  District  When  District  When  District  When  Debtor  Debtor  Debtor  Debtor  Debtor  When  Debtor   | courself, you may pay with cash, cashier's check, or money calf, your attorney may pay with a credit card or check with con, sign and attach the <i>Application for Individuals to Pay</i> on only if you are filing for Chapter 7. By law, a judge may, our income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out  |
| Chapter 12 Chapter 13    Chapter 13  | courself, you may pay with cash, cashier's check, or money calf, your attorney may pay with a credit card or check with con, sign and attach the <i>Application for Individuals to Pay</i> on only if you are filing for Chapter 7. By law, a judge may, our income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out  |
| 8. How you will pay the fee    I will pay the entire fee when I file my petition. Please check about how you may pay. Typically, if you are paying the fee your order. If your attorney is submitting your payment on your behalt a pre-printed address.   I need to pay the fee in installments. If you choose this option The Filing Fee in Installments (Official Form 103A).   I request that my fee be waived (You may request this option but is not required to, waive your fee, and may do so only if you applies to your family size and you are unable to pay the fee in the Application to Have the Chapter 7 Filing Fee Waived (Offional Port Last 8 years?)   No.   | courself, you may pay with cash, cashier's check, or money calf, your attorney may pay with a credit card or check with con, sign and attach the <i>Application for Individuals to Pay</i> on only if you are filing for Chapter 7. By law, a judge may, our income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out  |
| I will pay the entire fee when I file my petition. Please ched about how you may pay. Typically, if you are paying the fee yorder. If your attorney is submitting your payment on your behalver. If you choose this option the Filing Fee in Installments. If you choose this option the Filing Fee in Installments. If you choose this option the Filing Fee in Installments (Official Form 103A).    I request that my fee be waived (You may request this option but is not required to, waive your fee, and may do so only if you applies to your family size and you are unable to pay the fee in the Application to Have the Chapter 7 Filing Fee Waived (Offion bankruptcy within the last 8 years?    No.  | courself, you may pay with cash, cashier's check, or money calf, your attorney may pay with a credit card or check with con, sign and attach the <i>Application for Individuals to Pay</i> on only if you are filing for Chapter 7. By law, a judge may, our income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out  |
| about how you may pay. Typically, if you are paying the fee your order. If your attorney is submitting your payment on your beha a pre-printed address.    Ineed to pay the fee in installments. If you choose this opting the Feling Fee in Installments (Official Form 103A).     I request that my fee be waived (You may request this option but is not required to, waive your fee, and may do so only if you applies to your family size and you are unable to pay the fee in the Application to Have the Chapter 7 Filing Fee Waived (Offion bankruptcy within the last 8 years?   No.     Yes.   District   When   District   When     District   When   When     Debtor   District   When   District   When     Debtor   District   When   District   When     Debtor   District   When   District   When   District   When   District   When   District   When   D | courself, you may pay with cash, cashier's check, or money calf, your attorney may pay with a credit card or check with con, sign and attach the <i>Application for Individuals to Pay</i> on only if you are filing for Chapter 7. By law, a judge may, our income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out  |
| about how you may pay. Typically, if you are paying the fee your order. If your attorney is submitting your payment on your beha a pre-printed address.    Ineed to pay the fee in installments. If you choose this opting the Feling Fee in Installments (Official Form 103A).     I request that my fee be waived (You may request this option but is not required to, waive your fee, and may do so only if you applies to your family size and you are unable to pay the fee in the Application to Have the Chapter 7 Filing Fee Waived (Offion bankruptcy within the last 8 years?   No.     Yes.   District   When   District   When     District   When   When     Debtor   District   When   District   When     Debtor   District   When   District   When     Debtor   District   When   District   When   District   When   District   When   District   When   D | courself, you may pay with cash, cashier's check, or money calf, your attorney may pay with a credit card or check with con, sign and attach the <i>Application for Individuals to Pay</i> on only if you are filing for Chapter 7. By law, a judge may, our income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out  |
| The Filing Fee in Installments (Official Form 103A).    request that my fee be waived (You may request this optio but is not required to, waive your fee, and may do so only if yo applies to your family size and you are unable to pay the fee in the Application to Have the Chapter 7 Filing Fee Waived (Offional Police Institute | n only if you are filing for Chapter 7. By law, a judge may, our income is less than 150% of the official poverty line that n installments). If you choose this option, you must fill out   |
| □ I request that my fee be waived (You may request this option but is not required to, waive your fee, and may do so only if yo applies to your family size and you are unable to pay the fee in the Application to Have the Chapter 7 Filing Fee Waived (Office)  9. Have you filed for bankruptcy within the last 8 years? □ No. □ Yes. □ District □ When □ W  | our income is less than 150% of the official poverty line that<br>n installments). If you choose this option, you must fill out   |
| but is not required to, waive your fee, and may do so only if yo applies to your family size and you are unable to pay the fee in the Application to Have the Chapter 7 Filing Fee Waived (Office)  9. Have you filed for bankruptcy within the last 8 years?    No.     Yes.  | our income is less than 150% of the official poverty line that<br>n installments). If you choose this option, you must fill out   |
| bankruptcy within the last 8 years?  District When District When District When  No  10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?  Debtor District When  When  When  No  Debtor Debtor District Debtor   |   |
| District   |   |
| District When  10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?  Debtor District When  No Debtor  Debtor District Debtor  | Case number   |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?  Debtor District Debtor  | Case number   |
| cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?  Debtor District Debtor   | Case number   |
| cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?  Debtor District Debtor   |   |
| filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?  Debtor District Debtor  |   |
| District When  |   |
| Debtor   | Relationship to you   |
|  | Case number, if known   |
|  | Relationship to you   |
| District When  | Case number, if known   |
| 11. Do you rent your   |   |
| residence?  ■ Yes. Has your landlord obtained an eviction judgment against   | st you and do you want to stay in your residence?   |
| ■ No. Go to line 12.   |   |
| <del>-</del>   |   |
| Yes. Fill out <i>Initial Statement About an Eviction</i> bankruptcy petition.  | Judgment Against You (Form 101A) and file it with this  |

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Debtor 1 Geraldine Hendricks-Mcccan

| Par   | t 3: Report About Any Bu   | sinesses '                             | You Own  | as a Sole Proprie                     | tor   |  |
|---|--|--|--|---------------------------------------|---|--|
| 12. Are you a sole proprietor of any full- or part-time ■ No. Go to Part 4. business? |  |  | Go to  | Part 4.                               |   |  |
|   |  | ☐ Yes.                                 | Name   | and location of bus                   | siness  |  |
|   | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. |  | Name   | of business, if any                   |   |  |
|   | If you have more than one sole proprietorship, use a   | ave more than one oprietorship, use a  |  | er, Street, City, Sta                 | te & ZIP Code   |  |
|   | separate sheet and attach it to this petition.   |  | Check  | the appropriate bo                    | ox to describe your business:   |  |
|   |  |  |  | Health Care Busin                     | ness (as defined in 11 U.S.C. § 101(27A))   |  |
|   |  |  |  | Single Asset Real                     | Estate (as defined in 11 U.S.C. § 101(51B))   |  |
|   |  |  |  | Stockbroker (as d                     | lefined in 11 U.S.C. § 101(53A))  |  |
|   |  |  | Commodity Broke  | er (as defined in 11 U.S.C. § 101(6)) |   |  |
|   |  |  |  | None of the above                     | e   |  |
| 13.   | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and are<br>you a small business<br>debtor?  | deadlines<br>operation                 | If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B). |                                       |   |  |
|   |  | ■ No.                                  | I am n   | ot filing under Chap                  | oter 11.  |  |
|   | For a definition of small business debtor, see 11 U.S.C. § 101(51D).   | □ No.                                  | I am fi<br>Code.   | ling under Chapter                    | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy  |  |
|   |  | ☐ Yes.                                 | I am fi  | ling under Chapter                    | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |  |
| Par   | t 4: Report if You Own or  | Have Any                               | Hazardo  | us Property or An                     | y Property That Needs Immediate Attention   |  |
| 14.   | Do you own or have any   | ■ No.                                  |  |                                       |   |  |
|   | property that poses or is alleged to pose a threat of imminent and   | ☐ Yes.                                 | What is t  | he hazard?                            |   |  |
|   | identifiable hazard to public health or safety? Or do you own any  |  |  |                                       |   |  |
|   | property that needs immediate attention?   |  |  | iate attention is why is it needed?   |   |  |
|   | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?                                |  | Where is   | the property?                         |   |  |
| Number, Street, City, State & Zip Code  |  | Number, Street, City, State & Zip Code |  |                                       |   |  |
|   |  |  |  |                                       |   |  |

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Debtor 1 Geraldine Hendricks-Mcccan

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 46 Case number (if known) Debtor 1 **Geraldine Hendricks-Mcccan** Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **25,001-50,000** you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ■ More than 100,000 □ 100-199 **200-999** How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Geraldine Hendricks-Mcccan

Geraldine Hendricks-Mcccan

MM / DD / YYYY

Executed on April 11, 2017

Signature of Debtor 1

Signature of Debtor 2

MM / DD / YYYY

Executed on

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Debtor 1 Geraldine Hendricks-Mcccan

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Joseph F Lentner                   | Date          | April 11, 2017            |
|--|---------------|---------------------------|
| Signature of Attorney for Debtor       |               | MM / DD / YYYY            |
| Joseph F Lentner Printed name          |               |                           |
| Swanson & Desai, LLC                   |               |                           |
| Firm name                              |               |                           |
| 2314 W North Ave Unit C-1W             |               |                           |
| Chicago, IL 60647                      |               |                           |
| Number, Street, City, State & ZIP Code |               |                           |
| Contact phone 312-666-7882             | Email address | kswanson@swansondesai.com |
| 6291735                                |               |                           |
| Bar number & State                     |               | <del></del>               |

|   |                            | DOGUM             | eni Paue 8 di 46 |  |  |  |
|---|----------------------------|-------------------|------------------|--|--|--|
| ill in this infor                       | mation to identify your    | case:             |                  |  |  |  |
| Debtor 1                                | Geraldine Hendricks-Mcccan |                   |                  |  |  |  |
|   | First Name                 | Middle Name       | Last Name        |  |  |  |
| Debtor 2                                |                            |                   |                  |  |  |  |
| Spouse if, filing)                      | First Name                 | Middle Name       | Last Name        |  |  |  |
| United States Bankruptcy Court for the: |                            | NORTHERN DISTRICT | OF ILLINOIS      |  |  |  |
| Case number _                           |                            |                   |                  |  |  |  |

☐ Check if this is an amended filing

12/15

### Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

|    |  | V            | 4-                            |
|----|--|--------------|-------------------------------|
|    |  | Your as      | ssets<br>of what you own      |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B   | \$           | 0.00                          |
|    | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$           | 4,770.00                      |
|    | 1c. Copy line 63, Total of all property on Schedule A/B  | \$           | 4,770.00                      |
| Pa | st 2: Summarize Your Liabilities   |              |                               |
|    |  |              | <b>abilities</b><br>t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$           | 0.00                          |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                           | \$           | 0.00                          |
|    | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$           | 25,794.00                     |
|    | Your total liabilities   | \$           | 25,794.00                     |
| Pa | rt 3: Summarize Your Income and Expenses   |              |                               |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$           | 1,789.07                      |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$           | 1,825.00                      |
| Pa | Answer These Questions for Administrative and Statistical Records  |              |                               |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | ır other sch | nedules.                      |
|    | ■ Yes What kind of debt do you have?   |              |                               |

the court with your other schedules.

Official Form 106Sum

Summary of You

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

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Case number (if known) Document

Debtor 1 Geraldine Hendricks-Mcccan

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 786.28 \$ 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following:   | Total | claim |
|--|-------|-------|
| 9a. Domestic support obligations (Copy line 6a.)   | \$    | 0.00  |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$    | 0.00  |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$    | 0.00  |
| 9d. Student loans. (Copy line 6f.)   | \$    | 0.00  |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$    | 0.00  |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$   | 0.00  |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$    | 0.00  |

|   |  | Documen                               | t Page 10 of 46   |   |
|---|--|---------------------------------------|---|---|
| Fill in this informa  | ation to identify your                                   | case and this filing:                 |   |   |
| Debtor 1  | Geraldine Hendri   | icks-Mcccan Middle Name               | Last Name   |   |
| Debtor 2  | i iist ivaine  | ivildule Ivalile                      | Lastivanie  |   |
| (Spouse, if filing)   | First Name   | Middle Name                           | Last Name   |   |
| United States Banl  | kruptcy Court for the:                                   | NORTHERN DISTRICT OF                  | FILLINOIS   |   |
| Case number   |  |                                       |   | ☐ Check if this is an amended filing  |
| Official For  | m 106A/B   |                                       |   |   |
| Schedule  | A/B: Prop  | erty                                  |   | 12/15   |
| hink it fits best. Be<br>nformation. If more<br>Answer every questi | as complete and accura<br>space is needed, attach<br>on. | ate as possible. If two married       | e. If an asset fits in more than one category, list<br>people are filing together, both are equally respo<br>On the top of any additional pages, write your na<br>ou Own or Have an Interest In | nsible for supplying correct  |
| . Do you own or ha  | ve any legal or equitabl                                 | e interest in any residence, bui      | llding, land, or similar property?  |   |
| No. Go to Part 2  | 2.   |                                       |   |   |
| ☐ Yes. Where is t   | the property?  |                                       |   |   |
| Part 2: Describe Yo   | our Vehicles   |                                       |   |   |
| someone else drive  | s. If you lease a vehic                                  |                                       | cles, whether they are registered or not? In: G: Executory Contracts and Unexpired Lease  |   |
| ■ No  |  |                                       |   |   |
| ☐ Yes   |  |                                       |   |   |
|   |  |                                       | vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories  |   |
| ■ No  |  |                                       |   |   |
| ☐ Yes   |  |                                       |   |   |
|   |  |                                       | ies from Part 2, including any entries for  | => \$0.00   |
| Part 3: Describe Yo   | our Personal and Hous                                    | ehold Items                           |   |   |
|   |  | able interest in any of the f         | ollowing items?   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|   | .,   | , linens, china, kitchenware          |   |   |
| . 33. 2000116   |  | sehold goods. furniture               | , dinette set, couch, bedroom set   | \$2,000.00  |
|   |  | , , , , , , , , , , , , , , , , , , , | ,   |   |

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

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Case number (if known) Document

Debtor 1 **Geraldine Hendricks-Mcccan** 

|    |  | used consumer electronics, tv , cell phone   | \$100.00   |
|----|--|--|--|
| 8. | other collection   | figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coons, memorabilia, collectibles | in, or baseball card collections;  |
|    | ☐ Yes. Describe  |  |  |
| 9. | Equipment for sports at Examples: Sports, photo musical instru   | graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoe                                   | es and kayaks; carpentry tools;  |
|    | ☐ Yes. Describe  |  |  |
| 10 | <ul> <li>Firearms Examples: Pistols, rifles ■ No □ Yes, Describe</li> </ul>                                      | s, shotguns, ammunition, and related equipment   |  |
|    | L 100. Decombe   |  |  |
| 11 | <ul><li>Clothes</li></ul>  | othes, furs, leather coats, designer wear, shoes, accessories  |  |
|    |  |  | •  |
|    |  | used clothing  | \$600.00   |
|    | ■ Yes. Describe  | fur coat, jewelry  | \$2,000.00   |
|    | S. Non-farm animals  Examples: Dogs, cats,  No  Yes. Describe  Any other personal an  No  Yes. Give specific inf | d household items you did not already list, including any health aids you did not list   |  |
| 1  |  | of all of your entries from Part 3, including any entries for pages you have attached number here                              | \$4,700.00   |
| P  | art 4: Describe Your Finan   | cial Assets  |  |
|    |  | egal or equitable interest in any of the following?  | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
| 16 | Examples: Money you  | have in your wallet, in your home, in a safe deposit box, and on hand when you file your per                                   | tition   |

Case 17-11374 Doc 1 Filed 04/11/17 Entered 04/11/17 09:32:46 Desc Main Document Page 12 of 46 Case number (if known)

| 17. |  |            |                         | counts; certificates of depo  | osit; shares in credit unions, brokerage houses n, list each.                  | , and other similar   |
|-----|--|------------|-------------------------|---|--|-----------------------|
|     | □ No ■ Yes   |            | ·                       | Institution name:   |  |                       |
|     | Tes  |            |                         |   |  |                       |
|     |  | 17.1.      | Checking                | Chase   |  | \$48.00               |
|     |  | 17.2.      | Savings                 | Chase   |  | \$22.00               |
| 18. | . Bonds, mutual funds, o Examples: Bond funds, i ■ No    |            |                         | orokerage firms, money ma   | arket accounts   |                       |
|     | ☐ Yes  |            | Institution or issue    | er name:  |  |                       |
| 19. | Non-publicly traded sto joint venture ■ No               | ck and     | interests in incor      | porated and unincorpora   | ated businesses, including an interest in an                                   | LLC, partnership, and |
|     | ☐ Yes. Give specific info                                |            | about themne of entity: |   | % of ownership:  |                       |
| 20. | Negotiable instruments in                                | nclude p   | ersonal checks, ca      | gotiable and non-negotial<br>ashiers' checks, promissory<br>transfer to someone by sign | ry notes, and money orders.  |                       |
|     | ☐ Yes. Give specific infor                               |            | about them<br>uer name: |   |  |                       |
| 21. | Retirement or pension a<br>Examples: Interests in IF     |            |                         | , 403(b), thrift savings acco   | ounts, or other pension or profit-sharing plans                                |                       |
|     | ■ No   |            |                         |   |  |                       |
|     | ☐ Yes. List each account                                 |            | ely.<br>of account:     | Institution name:   |  |                       |
| 22. | Examples: Agreements v                                   | deposit    | s you have made         |   | service or use from a company<br>gas, water), telecommunications companies, or | others                |
|     | ■ No □ Yes   |            |                         | Institution name o  | or individual:   |                       |
| າາ  |  | o porio    | dia navmant of man      | ney to you, either for life or  |  |                       |
| ۷٥. | No   | а репо     | uic payment of mo       | ney to you, either for life or  | Tor a number or years)   |                       |
|     | ☐ Yes Issu   | uer nam    | e and description.      |   |  |                       |
| 24. | Interests in an education<br>26 U.S.C. §§ 530(b)(1), 52  |            |                         | qualified ABLE program,   | , or under a qualified state tuition program.                                  |                       |
|     | * * *  | titution r | name and descripti      | on. Separately file the reco  | ords of any interests.11 U.S.C. § 521(c):                                      |                       |
| 25. | . Trusts, equitable or futu ■ No                         | ure inte   | rests in property (     | (other than anything liste  | ed in line 1), and rights or powers exercisab                                  | ole for your benefit  |
|     | ☐ Yes. Give specific info                                | rmation    | about them              |   |  |                       |
| 26. | Examples: Internet doma                                  |            |                         | and other intellectual pro<br>eeds from royalties and lice                              |  |                       |
|     | <ul><li>■ No</li><li>□ Yes. Give specific info</li></ul> | rmation    | about them              |   |  |                       |
| 27. | Licenses, franchises, a                                  | nd othe    | r general intangib      |   |  |                       |
|     | Examples: Building perm  ■ No                            | nits, exc  | lusive licenses, cod    | operative association holdin  | ings, liquor licenses, professional licenses                                   |                       |

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1

|   | Case 17-11374  | Doc 1  | Filed 04/11/17   | Entered 04/11/17 09:32:46   | Desc Main   |
|---|--|--|--|---|---|
| Debtor 1  | Geraldine Hendricks-I  | Mcccan   | Document   | Page 13 of 46 Case number (if known)  |   |
| ☐ Yes   | s. Give specific information ab  | oout them  |  |   |   |
| Money o   | or property owed to you?   |  |  |   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ■ No  |  | out them, inc  | cluding whether you alre   | ady filed the returns and the tax years   |   |
| <i>Exar</i><br>■ No   | •  |  | usal support, child suppo  | ort, maintenance, divorce settlement, property  | settlement  |
| Exar<br>■ No  | benefits; unpaid loans y   | y insurance p  |  | efits, sick pay, vacation pay, workers' compe   | nsation, Social Security  |
|   |  | insurance; h   | nealth savings account (   | HSA); credit, homeowner's, or renter's insural  | nce   |
| ■ Yes   | s. Name the insurance compar<br>Comp   | ny of each po<br>eany name:                                      | olicy and list its value.  | Beneficiary:  | Surrender or refund   |
|   |  |  |  |   | value:  |
|   | (Who   | -  | o cash value. Accou  | unt is Children   | value:<br>\$0.00  |
| If you some ■ No □ Yes  | interest in property that is du<br>u are the beneficiary of a living<br>eone has died.<br>s. Give specific information   | ue you from<br>g trust, expec                                    | someone who has die  | ed surance policy, or are currently entitled to rec   | \$0.00  |
| If you some No Yes  | interest in property that is du<br>u are the beneficiary of a living<br>eone has died.  s. Give specific information  ns against third parties, whe<br>imples: Accidents, employment   | ue you from<br>g trust, expec                                    | someone who has die<br>et proceeds from a life in<br>you have filed a lawsu  | children  ed surance policy, or are currently entitled to rec   | \$0.00  |
| If you some No Yes  33. Claim Exar  No Yes  34. Other   | interest in property that is du u are the beneficiary of a living eone has died.  s. Give specific information  ns against third parties, whe mples: Accidents, employment s. Describe each claim r contingent and unliquidate   | ue you from<br>g trust, expect<br>ther or not y<br>disputes, ins | someone who has die<br>t proceeds from a life in<br>you have filed a lawsu<br>surance claims, or rights                    | children  ed surance policy, or are currently entitled to rec   | eive property because   |
| If you some No Yes  33. Claim Exam No Yes  34. Other No Yes  35. Any f                          | interest in property that is du u are the beneficiary of a living eone has died.  s. Give specific information  ns against third parties, whe mples: Accidents, employment s. Describe each claim r contingent and unliquidate s. Describe each claim financial assets you did not a   | ther or not y  | someone who has die<br>t proceeds from a life in<br>you have filed a lawsu<br>surance claims, or rights                    | children  ed surance policy, or are currently entitled to receive to receive to read a demand for payment is to sue   | eive property because   |
| If you some No Yes  33. Claim Exam No Yes  34. Other No Yes  35. Any f No Yes  36. Add          | interest in property that is due are the beneficiary of a living eone has died.  s. Give specific information  Ins against third parties, where mples: Accidents, employment is. Describe each claim  Ir contingent and unliquidate is. Describe each claim  financial assets you did not a set of the dollar value of all of you interest that is described in the dollar value of all of you interest that is described in the dollar value of all of you interest that is due to the dollar value | ther or not y disputes, installed claims of                      | someone who has die the proceeds from a life in you have filed a lawsu surance claims, or rights every nature, includin    | children  ed surance policy, or are currently entitled to receive to receive to read a demand for payment is to sue   | eive property because   |
| If you some No Yes  33. Claim Exar  No Yes  34. Other  No Yes  35. Any f  No Yes  36. Add for f | interest in property that is due are the beneficiary of a living eone has died.  s. Give specific information  Ins against third parties, where mples: Accidents, employment is. Describe each claim  Ir contingent and unliquidate is. Describe each claim  financial assets you did not a set of the dollar value of all of you interest that is described in the dollar value of all of you interest that is described in the dollar value of all of you interest that is due to the dollar value | ther or not y disputes, installed claims of                      | someone who has die the proceeds from a life in you have filed a lawsu surance claims, or rights every nature, including a | children  ed surance policy, or are currently entitled to receit or made a demand for payment at to sue  g counterclaims of the debtor and rights to the debtor and rights | eive property because   |

Official Form 106A/B Schedule A/B: Property page 4

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Case number (if known) Debtor 1 **Geraldine Hendricks-Mcccan** Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$4,700.00 58. Part 4: Total financial assets, line 36 \$70.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00

\$0.00

Copy personal property total

\$4,770.00

Official Form 106A/B Schedule A/B: Property page 5

Part 7: Total other property not listed, line 54

62. Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$4,770.00

\$4,770.00

| Э  |   |  | Document  |  | Page 15 of 46  | _   |
|--|---|--|---|--|--|---|
|  | l in this inform  | nation to identify your  | case:   |  |  |   |
| De   | btor 1  | Geraldine Hendri   | cks-Mcccan  |  |  |   |
|  |   | First Name   | Middle Name   | L  | ast Name   |   |
|  | btor 2<br>ouse if, filing)  | First Name   | Middle Name   | L  | ast Name   |   |
| Un   | ited States Bar   | nkruptcy Court for the:  | NORTHERN DISTRICT OF  | ILLIN  | OIS  |   |
| Ca   | se number   |  |   |  |  |   |
|  | nown)   |  |   |  |  | ☐ Check if this is an amended filing  |
| O <sup>·</sup>                                       | ficial Fo   | rm 106C  |   |  |  |   |
|  |   |  | operty You Cla  | aim  | as Exempt  | 4/16  |
| the<br>nee<br>cas<br>For<br>spe<br>any<br>fun<br>exe | property you listed the fill out and enumber (if kn each item of cific dollar and applicable st ds—may be applicable the applicable   | sted on Schedule A/B: Fd attach to this page as nown).  property you claim as nount as exempt. Alter atutory limit. Some exenlimited in dollar amount.   | Property (Official Form 106A/B<br>many copies of Part 2: Addition<br>exempt, you must specify the<br>natively, you may claim the<br>emptions—such as those for<br>unt. However, if you claim a<br>cand the value of the prope | ) as yo<br>onal Pa<br>ne amo<br>full fa<br>or heal<br>n exen | our source, list the property that you age as necessary. On the top of any ount of the exemption you claim. It market value of the property be thaids, rights to receive certain known of 100% of fair market value.   | One way of doing so is to state a sing exempted up to the amount of benefits, and tax-exempt retirement |
| 1.   | ■ You are cla   | aiming state and federal   | nonbankruptcy exemptions.  11 U.S.C. § 522(b)(2)  | 11 U.S   | S.C. § 522(b)(3)   |   |
| 1.   | ■ You are cla   | aiming state and federal   | nonbankruptcy exemptions. ns. 11 U.S.C. § 522(b)(2)   | 11 U.S   | , ,  |   |
| 1.   | ■ You are cla □ You are cla For any prop Brief description  | aiming state and federal   | nonbankruptcy exemptions.  ns. 11 U.S.C. § 522(b)(2)  ule A/B that you claim as exe e on Current value of the portion you own   | 11 U.S<br>empt,  | fill in the information below.   | Specific laws that allow exemption  |
| 1.   | ■ You are cla □ You are cla For any prop Brief description  | aiming state and federal aiming federal exemption erty you list on Schedoon of the property and line   | nonbankruptcy exemptions.  ns. 11 U.S.C. § 522(b)(2)  ule A/B that you claim as exe e on Current value of the   | 11 U.S<br>empt,  | S.C. § 522(b)(3)  fill in the information below.   | Specific laws that allow exemption  |
| 1.   | ■ You are cla □ You are cla For any prop Brief descriptic Schedule A/Bri used house   | aiming state and federal aiming federal exemption erty you list on Schedon of the property and line that lists this property   | nonbankruptcy exemptions.  ns. 11 U.S.C. § 522(b)(2)  ule A/B that you claim as exe e on  | 11 U.S<br>empt,  | fill in the information below.   | Specific laws that allow exemption 735 ILCS 5/12-1001(b)  |
| 1.   | ■ You are cla □ You are cla For any prop Brief descriptic Schedule A/Bri used house dinette set,  | aiming state and federal aiming federal exemption erty you list on Schedon on of the property and line that lists this property  | nonbankruptcy exemptions.  ns. 11 U.S.C. § 522(b)(2)  ule A/B that you claim as exe e on  | 11 U.S<br>empt,  | fill in the information below.  ount of the exemption you claim  eck only one box for each exemption.  |   |
| 1.   | ■ You are cla □ You are cla For any prop Brief descriptic Schedule A/Bri used house dinette set, Line from Sch  | aiming state and federal aiming federal exemption erty you list on Schedon of the property and line that lists this property ehold goods, furnituic couch, bedroom se  | nonbankruptcy exemptions.  ns. 11 U.S.C. § 522(b)(2)  ule A/B that you claim as exe e on Current value of the portion you own Copy the value from Schedule A/B  re, \$2,000.00  | empt, Am   | fill in the information below.  ount of the exemption you claim  eck only one box for each exemption.  \$2,000.00  100% of fair market value, up to  |   |
| 1.   | ■ You are cla □ You are cla For any prop Brief descriptic Schedule A/Bri  used house dinette set, Line from Sch  used consuphone  | aiming state and federal aiming federal exemption erty you list on Scheduler on of the property and line that lists this property ehold goods, furnitude couch, bedroom semedule A/B: 6.1  | nonbankruptcy exemptions.  ns. 11 U.S.C. § 522(b)(2)  ule A/B that you claim as exe e on Current value of the portion you own Copy the value from Schedule A/B  re, t \$2,000.00  | empt, Am   | fill in the information below.  ount of the exemption you claim  eck only one box for each exemption.  \$2,000.00  100% of fair market value, up to any applicable statutory limit   | 735 ILCS 5/12-1001(b)   |
| 1.   | ■ You are cla □ You are cla For any prop Brief descriptic Schedule A/Bri  used house dinette set, Line from Sch  used consuphone Line from Sch  used clothi                               | eaiming state and federal eaiming federal exemption erty you list on Schedule on of the property and line that lists this property ehold goods, furnituit couch, bedroom semedule A/B: 6.1   | nonbankruptcy exemptions.  ns. 11 U.S.C. § 522(b)(2)  ule A/B that you claim as exe e on Current value of the portion you own Copy the value from Schedule A/B  re, t \$2,000.00  | empt, Am   | fill in the information below.  ount of the exemption you claim  eck only one box for each exemption.  \$2,000.00  100% of fair market value, up to any applicable statutory limit  \$100.00  100% of fair market value, up to   | 735 ILCS 5/12-1001(b)   |
| 1.   | ■ You are cla □ You are cla For any prop Brief descriptic Schedule A/Bri  used house dinette set, Line from Sch  used consuphone Line from Sch  used clothi                               | aiming state and federal aiming federal exemption erty you list on Schedule on of the property and line that lists this property ehold goods, furnituic couch, bedroom semedule A/B: 6.1   | nonbankruptcy exemptions.  ns. 11 U.S.C. § 522(b)(2)  ule A/B that you claim as exemption as exemption you own  Copy the value from Schedule A/B  re, t  , cell \$100.00  | empt, Am   | fill in the information below.  ount of the exemption you claim  eck only one box for each exemption.  \$2,000.00  100% of fair market value, up to any applicable statutory limit  \$100.00  100% of fair market value, up to any applicable statutory limit  | 735 ILCS 5/12-1001(b) 735 ILCS 5/12-1001(b)   |
| 1.   | ■ You are cla □ You are cla For any prop Brief description Schedule A/Bri  used house dinette set, Line from Sch  used consuphone Line from Sch  used clothi Line from Sch  fur coat, jev | eaiming state and federal eaiming federal exemption erty you list on Schedule on of the property and line that lists this property ehold goods, furnituit couch, bedroom semedule A/B: 6.1  Immer electronics, to medule A/B: 7.1  Image description of the property and line that lists this property are listed to the line that lists this property and line that lists this property and line that lists this property and line that lists this property are listed to the list lists this property are listed to the list lists this property and line that lists this property and line that lists this property and line that lists this property are listed to the list lists this property and line that lists this property and line that lists this property are listed to the list lists this property and line that lists this property are listed to the list lists this proper | nonbankruptcy exemptions.  ns. 11 U.S.C. § 522(b)(2)  ule A/B that you claim as exemption as exemption you own  Copy the value from Schedule A/B  re, t  , cell \$100.00  | empt, Am   | fill in the information below.  ount of the exemption you claim  eck only one box for each exemption.  \$2,000.00  100% of fair market value, up to any applicable statutory limit  \$100.00  100% of fair market value, up to any applicable statutory limit  \$0.00  100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) 735 ILCS 5/12-1001(b)   |

| (Subject to a | iajustinent o | 11 4/0 1/ 19 al | id every 3 | years arre | lilat ioi | cases illeu | on or an | iei ille date | oi auju | Sunent. |
|---------------|---------------|-----------------|------------|------------|-----------|-------------|----------|---------------|---------|---------|
|               |               |                 |            |            |           |             |          |               |         |         |

■ No

Official Form 106C

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes Case 17-11374 Doc 1 Filed 04/11/17 Entered 04/11/17 09:32:46 Desc Main Document Page 16 of 46

Debtor 1 Geraldine Hendricks-Mcccan

| Fill in this infor                      |                  |                   |             |                       |
|---|------------------|-------------------|-------------|-----------------------|
| Debtor 1                                | Geraldine Hendri | cks-Mcccan        |             |                       |
|   | First Name       | Middle Name       | Last Name   |                       |
| Debtor 2                                |                  |                   |             |                       |
| (Spouse if, filing)                     | First Name       | Middle Name       | Last Name   |                       |
| United States Bankruptcy Court for the: |                  | NORTHERN DISTRICT | OF ILLINOIS |                       |
| Case number                             |                  |                   |             |                       |
| (if known)                              |                  |                   |             | ☐ Check if this is an |
|   |                  |                   |             | amended filing        |

### Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

| `   | Jaco 11 1101+ 1   | Document  | Page 18 of 46  | 72.4 <b>0</b> Des   | o mani                   |
|---|---|---|--|---------------------|--------------------------|
| Fill in this info                                       | ormation to identify your   |   |  |                     |                          |
| Debtor 1  | Geraldine Hendri  | cks-Meccan  |  |                     |                          |
| Debter 1  | First Name  | Middle Name   | Last Name  |                     |                          |
| Debtor 2  |   |   |  |                     |                          |
| (Spouse if, filing)                                     | First Name  | Middle Name   | Last Name  |                     |                          |
| United States   | Bankruptcy Court for the:   | NORTHERN DISTRICT OF IL   | LLINOIS  |                     |                          |
| Case number   |   |   |  |                     |                          |
| (if known)  |   |   |  | □ CI                | neck if this is an       |
|   |   |   |  | ar                  | nended filing            |
| Official Ea   | rm 106E/E   |   |  |                     |                          |
|   | rm 106E/F   | lha Haya Haasayira  | d Claima   |                     | 40/4E                    |
|   |   | ho Have Unsecured   | I CIAIMS<br>ITY claims and Part 2 for creditors with N   |                     | 12/15                    |
| Schedule D: Cre<br>eft. Attach the C<br>name and case i | ditors Who Have Claims Sec<br>Continuation Page to this pag<br>number (if known). | eured by Property. If more space is<br>ge. If you have no information to re | Do not include any creditors with partiall<br>s needed, copy the Part you need, fill it ou<br>eport in a Part, do not file that Part. On the | it, number the enti | ries in the boxes on the |
|   | All of Your PRIORITY Ur   |   |  |                     |                          |
|   | ditors have priority unsecure   | d claims against you?   |  |                     |                          |
| No. Go t  | o Part 2.   |   |  |                     |                          |
| ☐ Yes.  |   |   |  |                     |                          |
| Part 2: List  | All of Your NONPRIORIT  | Y Unsecured Claims  |  |                     |                          |
| 3. Do any cree  | ditors have nonpriority unsec   | cured claims against you?   |  |                     |                          |
| ☐ No. You   | have nothing to report in this p  | eart. Submit this form to the court with                                    | h your other schedules.  |                     |                          |
| Yes.  |   |   |  |                     |                          |
| unsecured of  | claim, list the creditor separatel  | y for each claim. For each claim liste                                      | the creditor who holds each claim. If a creed, identify what type of claim it is. Do not list uhave more than three nonpriority unsecured    | claims already incl | uded in Part 1. If more  |
|   |   |   |  |                     | Total claim              |
| 4.1 Amer  | ricash  | Last 4 digits of ac   | count number   |                     | \$900.00                 |
| •   | ority Creditor's Name   |   |  | -                   | ·                        |
|   | ) Torrence Ave<br>ing, IL 60438   | When was the deb  | of incurred?   |                     |                          |
|   | r Street City State Zlp Code  | As of the date you  | u file, the claim is: Check all that apply   |                     |                          |
| Who in  | curred the debt? Check one.   | ·   |  |                     |                          |
| ■ Deb   | otor 1 only   | ☐ Contingent  |  |                     |                          |
| ☐ Deb   | otor 2 only   | ☐ Unliquidated  |  |                     |                          |
| ☐ Deb   | otor 1 and Debtor 2 only  | ☐ Disputed  |  |                     |                          |
| ☐ At le   | east one of the debtors and an  | other Type of NONPRIO   | RITY unsecured claim:  |                     |                          |
| ☐ Che   | eck if this claim is for a com  | munity  |  |                     |                          |
| debt  | oloim oubject to effect?  | · ·   | sing out of a separation agreement or divorce  | e that you did not  |                          |
|   | claim subject to offset?  | report as priority cla  | aims<br>on or profit-sharing plans, and other similar d  | ohto                |                          |
| ■ No  |   |   | in or profit-sharing plans, and other similar d  | enis                |                          |
| ☐ Yes   | •   | Other Specify   |  |                     |                          |

Debtor 1 Geraldine Hendricks-Mcccan

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Case number (if know)

| 4.2 | Capital Accounts   | Last 4 digits of account number                            | 2056   | \$385.00   |
|-----|--|--|--|------------|
|     | Nonpriority Creditor's Name  | _  |  |            |
|     | Po Box 140065<br>Nashville, TN 37214                                   | When was the debt incurred?                                | Opened 04/14 Last Active 09/13               |            |
|     | Number Street City State Zlp Code                                      | As of the date you file, the claim                         | s: Check all that apply                      |            |
|     | Who incurred the debt? Check one.                                      |  |  |            |
|     | ■ Debtor 1 only  | ☐ Contingent   |  |            |
|     | Debtor 2 only  | ☐ Unliquidated   |  |            |
|     | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |            |
|     | ☐ At least one of the debtors and another                              | Type of NONPRIORITY unsecure                               | d claim:                                     |            |
|     | ☐ Check if this claim is for a community                               | ☐ Student loans  |  |            |
|     | debt Is the claim subject to offset?                                   | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |            |
|     | ■ No   | Debts to pension or profit-sharing                         | g plans, and other similar debts             |            |
|     | ☐ Yes  | Other. Specify Collection                                  | Attorney Adela M Perez I                     |            |
| 4.3 | Credit Bureau Services   | Last 4 digits of account number                            |  | \$1,250.00 |
|     | Nonpriority Creditor's Name 1244 Jackson Street Alexandria, LA 71301   | When was the debt incurred?                                |  |            |
|     | Number Street City State Zlp Code  Who incurred the debt? Check one.   | As of the date you file, the claim                         | is: Check all that apply                     |            |
|     | ■ Debtor 1 only  | ☐ Contingent   |  |            |
|     | ☐ Debtor 2 only  | ☐ Unliquidated   |  |            |
|     | Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |            |
|     | ☐ At least one of the debtors and another                              | Type of NONPRIORITY unsecure                               | d claim:                                     |            |
|     | ☐ Check if this claim is for a community                               | ☐ Student loans  |  |            |
|     | debt   |  | ration agreement or divorce that you did not |            |
|     | Is the claim subject to offset?  | report as priority claims                                  |  |            |
|     | ■ No   | Debts to pension or profit-sharing                         | g plans, and other similar debts             |            |
|     | Yes  | Other. Specify   |  |            |
| 4.4 | Custom Coll Srvs Inc   | Last 4 digits of account number                            | 4642   | \$103.00   |
|     | Nonpriority Creditor's Name 55 E 86th Ave Ste A Merrillville, IN 46410 | When was the debt incurred?                                | Opened 12/12                                 |            |
|     | Number Street City State Zlp Code  Who incurred the debt? Check one.   | As of the date you file, the claim                         | is: Check all that apply                     |            |
|     | Debtor 1 only  | ☐ Contingent   |  |            |
|     | Debtor 2 only  | ☐ Unliquidated   |  |            |
|     | Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |            |
|     | ☐ At least one of the debtors and another                              | Type of NONPRIORITY unsecure                               | d claim:                                     |            |
|     | ☐ Check if this claim is for a community                               | ☐ Student loans  |  |            |
|     | debt Is the claim subject to offset?                                   | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |            |
|     | ■ No   | Debts to pension or profit-sharing                         | g plans, and other similar debts             |            |
|     | □Yes   | Other. Specify In  | Attorney Imaging Associates Of               |            |

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| Debio | Geraldine Hendricks-McCcan   |  | Case Humber (II know)                        |            |  |  |  |
|-------|--|--|--|------------|--|--|--|
| 4.5   | Debt Recovery Solution   | Last 4 digits of account number                              | 8934   | \$653.00   |  |  |  |
|       | Nonpriority Creditor's Name<br>900 Merchants Concourse<br>Westbury, NY 11590 | When was the debt incurred?                                  | Opened 09/16                                 |            |  |  |  |
|       | Number Street City State Zlp Code Who incurred the debt? Check one.          | As of the date you file, the claim                           | s: Check all that apply                      |            |  |  |  |
|       | Debtor 1 only  | ☐ Contingent   |  |            |  |  |  |
|       | Debtor 2 only  | ☐ Unliquidated   |  |            |  |  |  |
|       | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |            |  |  |  |
|       | ☐ At least one of the debtors and another                                    | Type of NONPRIORITY unsecured                                | d claim:                                     |            |  |  |  |
|       | ☐ Check if this claim is for a community                                     | ☐ Student loans  |  |            |  |  |  |
|       | debt<br>Is the claim subject to offset?                                      | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |            |  |  |  |
|       | ■ No   | Debts to pension or profit-sharing                           | g plans, and other similar debts             |            |  |  |  |
|       | Yes  | Other. Specify Collection                                    | Attorney Emp Of Cook County                  |            |  |  |  |
| 4.6   | First South Western Fn   | Last 4 digits of account number                              | 1446   | \$5,166.00 |  |  |  |
|       | Nonpriority Creditor's Name  |  | Opened 02/14 Last Active                     |            |  |  |  |
|       | 1845 W 4400 S Ste B2<br>Roy, UT 84067  | When was the debt incurred?                                  | 10/23/15                                     |            |  |  |  |
|       | Number Street City State Zlp Code  Who incurred the debt? Check one.         | As of the date you file, the claim                           | is: Check all that apply                     |            |  |  |  |
|       | Debtor 1 only  | ☐ Contingent   |  |            |  |  |  |
|       | Debtor 2 only  | ☐ Unliquidated   |  |            |  |  |  |
|       | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |            |  |  |  |
|       | $\square$ At least one of the debtors and another                            | Type of NONPRIORITY unsecured                                | d claim:                                     |            |  |  |  |
|       | ☐ Check if this claim is for a community                                     | Student loans  |  |            |  |  |  |
|       | debt<br>Is the claim subject to offset?                                      | ☐ Obligations arising out of a separeport as priority claims |  |            |  |  |  |
|       | No   | Debts to pension or profit-sharing                           | g plans, and other similar debts             |            |  |  |  |
|       | Yes  | Other. Specify Automobile                                    | Other. Specify Automobile                    |            |  |  |  |
| 4.7   | Ford Motor Credit Co   | Last 4 digits of account number                              |  | \$5,759.00 |  |  |  |
|       | Nonpriority Creditor's Name  1 american rd                                   | When was the debt incurred?                                  |  |            |  |  |  |
|       | Dearborn, MI 48126  Number Street City State Zlp Code                        | As of the date you file, the claim                           | s: Check all that apply                      |            |  |  |  |
|       | Who incurred the debt? Check one.  | •  | ,  |            |  |  |  |
|       | Debtor 1 only  | ☐ Contingent   |  |            |  |  |  |
|       | Debtor 2 only  | ,  |  |            |  |  |  |
|       | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |            |  |  |  |
|       | ☐ At least one of the debtors and another                                    | Type of NONPRIORITY unsecured                                | d claim:                                     |            |  |  |  |
|       | ☐ Check if this claim is for a community debt                                | ☐ Student loans ☐ Obligations arising out of a sepa          | ration agreement or divorce that you did not |            |  |  |  |
|       | Is the claim subject to offset?  | report as priority claims                                    | 3  |            |  |  |  |
|       | ■ No   | Debts to pension or profit-sharing                           | g plans, and other similar debts             |            |  |  |  |
|       | ☐ Yes  | Other, Specify   |  |            |  |  |  |

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Case number (if know)

4.8 L Fish Furniture Last 4 digits of account number \$834.00 Nonpriority Creditor's Name 801 E washington st When was the debt incurred? Indianapolis, IN 46219 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.9 Mercantile National Bank of IN Last 4 digits of account number \$8,788.00 Nonpriority Creditor's Name 7227 Calumet Ave When was the debt incurred? Hammond, IN 46324 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.1 **Tech Federal Credit Union** \$1,956.00 Last 4 digits of account number Nonpriority Creditor's Name 10951 Broadway When was the debt incurred? Crown Point, IN 46307 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts T Yes Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Line 4.4 of (Check one): **Custom Coll Srvs Inc** ☐ Part 1: Creditors with Priority Unsecured Claims

**Ccsi/Attn Bankruptcy** 

Debtor 1 Geraldine Hendricks-Mcccan

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Debtor 1 Geraldine Hendricks-Mcccan

| Geraidine Hendricks-Miccoan  |  | Case number (if know)                               |  |  |
|--|--|---|--|--|
| Po Box 10428<br>Merrillville, IN 46411                                 |  | Part 2: Creditors with Nonpriority Unsecured Claims |  |  |
| ,  | Last 4 digits of account number        |   |  |  |
| Name and Address   | On which entry in Part 1 or Part 2 did | d you list the original creditor?                   |  |  |
| Debt Recovery Solution   | Line 4.5 of (Check one):               | ☐ Part 1: Creditors with Priority Unsecured Claims  |  |  |
| Attention: Bankruptcy 6800 Jericho Turnpike Ste 113e Syosset, NY 11791 |  | Part 2: Creditors with Nonpriority Unsecured Claims |  |  |
| ,  | Last 4 digits of account number        |   |  |  |
|  |  |   |  |  |

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|              |     |   |     | Total Claim     |
|--------------|-----|---|-----|-----------------|
|              | 6a. | Domestic support obligations  | 6a. | \$<br>0.00      |
| Total claims |     |   |     |                 |
| from Part 1  | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$<br>0.00      |
|              | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$<br>0.00      |
|              | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$<br>0.00      |
|              | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$<br>0.00      |
|              |     |   |     | Total Claim     |
|              | 6f. | Student loans   | 6f. | \$<br>0.00      |
| Total claims |     |   |     |                 |
| from Part 2  | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$<br>0.00      |
|              | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$<br>0.00      |
|              | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$<br>25,794.00 |
|              | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$<br>25,794.00 |

| Fill in this infor                      |                  |                            |             |  |                       |  |  |
|---|------------------|----------------------------|-------------|--|-----------------------|--|--|
| Debtor 1                                | Geraldine Hendri | Geraldine Hendricks-Mcccan |             |  |                       |  |  |
|   | First Name       | Middle Name                | Last Name   |  |                       |  |  |
| Debtor 2                                |                  |                            |             |  |                       |  |  |
| (Spouse if, filing)                     | First Name       | Middle Name                | Last Name   |  |                       |  |  |
| United States Bankruptcy Court for the: |                  | NORTHERN DISTRICT          | OF ILLINOIS |  |                       |  |  |
| Case number                             |                  |                            |             |  |                       |  |  |
| (if known)                              |                  |                            |             |  | ☐ Check if this is an |  |  |
|   |                  |                            |             |  | amended filing        |  |  |

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Mark Holden
uknown

State what the contract or lease is for
lease for residence

|                               |                                | Docume  | nt Page 24 c            | of 46  |            |
|-------------------------------|--------------------------------|---|-------------------------|--|------------|
| Fill in this                  | information to identify you    | r case:   |                         |  |            |
| Debtor 1                      | Geraldine Hendi                | ricks-Mcccan  |                         |  |            |
|                               | First Name                     | Middle Name   | Last Name               |  |            |
| Debtor 2<br>(Spouse if, filir | ng) First Name                 | Middle Name   | Last Name               |  |            |
| United Sta                    | tes Bankruptcy Court for the:  | NORTHERN DISTRICT                                       | OF ILLINOIS             |  |            |
| Ormod Ota                     | too Barintaptoy Court for the. |   | <u> </u>                |  |            |
| Case numb                     | ber                            |   |                         | ☐ Check if this is an  |            |
| , ,                           |                                |   |                         | amended filing   |            |
| 0.44                          | . =                            |   |                         | <u> </u>   |            |
|                               | I Form 106H                    |   |                         |  |            |
| Sched                         | ule H: Your Cod                | debtors   |                         | 12/15  |            |
| Arizon                        |                                | a, Nevada, New Mexico, Pu                               | erto Rico, Texas, Washi | y? (Community property states and territories include ington, and Wisconsin.)  |            |
| in line<br>Form<br>out Co     | 2 again as a codebtor only     | if that person is a guaran<br>al Form 106E/F), or Sched | tor or cosigner. Make   | if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Official)6G). Use Schedule D, Schedule E/F, or Schedule G to find the Column 2: The creditor to whom you owe the debt Check all schedules that apply: | al<br>fill |
| 3.1                           |                                |   |                         | ☐ Schedule D, line   |            |
|                               | Name                           |   |                         | Schedule E/F, line   |            |
|                               |                                |   |                         | ☐ Schedule G, line   |            |
|                               | Number Street<br>City          | State   | ZIP Code                | _  |            |
|                               |                                |   |                         | Пол  | _          |
| 3.2                           | Name                           |   |                         | □ Schedule D, line<br>□ Schedule E/F, line   |            |
|                               |                                |   |                         | ☐ Schedule E/F, line   |            |
| -                             | Number Street                  |   |                         | _  |            |
|                               | City                           | State   | ZIP Code                |  |            |

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| Fill               | in this information   | to identify your ca              | ase:  |   |                       |                |                      |                |                      |   |                       |
|--------------------|---|----------------------------------|---|---|-----------------------|----------------|----------------------|----------------|----------------------|---|-----------------------|
|                    | btor 1  |                                  | endricks-Mcccan   |   |                       |                |                      |                |                      |   |                       |
|                    | btor 2<br>ouse, if filing)  |                                  |   |   |                       | _              |                      |                |                      |   |                       |
| Uni                | ited States Bankrup   | otcy Court for the               | NORTHERN DISTRIC  | CT OF ILLINOIS  |                       | _              |                      |                |                      |   |                       |
|                    | se number   |                                  |   |   |                       |                | □ A                  |                | ed filing<br>ent sho | l<br>wing postpetiti<br>ne following da |                       |
| 0                  | fficial Form  | <u> 1061</u>                     |   |   |                       |                | N                    | 1M / DD/ \     | YYYY                 |   |                       |
| S                  | chedule I:  | Your Inco                        | ome   |   |                       |                |                      |                |                      |   | 12/15                 |
| sup<br>spo<br>atta | plying correct info<br>puse. If you are sep<br>och a separate she | ormation. If you parated and you | sible. If two married peo<br>are married and not filin<br>r spouse is not filing wi<br>On the top of any addition | ng jointly, and your<br>th you, do not inclu                      | spouse i<br>de inforr | s liv<br>natio | ing with<br>on about | you, incl      | ude inf<br>ouse. If  | formation abo<br>f more space           | ut your<br>is needed, |
| 1.                 | Fill in your emplinformation.                                     | loyment                          |   | Debtor 1  |                       |                |                      | Debtor 2       | 2 or no              | n-filing spous                          | se .                  |
|                    |   |                                  | Employment status   | ■ Employed  |                       |                |                      | ☐ Empl         | oyed                 |   |                       |
|                    | information abou employers.                                       |                                  | _mproyment etatus   | ☐ Not employed  |                       |                |                      | ☐ Not employed |                      |   |                       |
|                    |   |                                  | Occupation  | Home Health Ca  | are                   |                |                      |                |                      |   |                       |
|                    | Include part-time<br>self-employed wo                             |                                  | Employer's name   | State of Illinois   |                       |                |                      |                |                      |   |                       |
|                    | Occupation may<br>or homemaker, if                                |                                  | Employer's address  | Illinois Departm<br>Servic<br>160 N. LaSalle S<br>Chicago, IL 606 | St., Suite            |                |                      |                |                      |   |                       |
|                    |   |                                  | How long employed the   | nere?   |                       |                |                      | _              |                      |   |                       |
| Pai                | rt 2: Give De   | etails About Mor                 | thly Income   |   |                       |                |                      |                |                      |   |                       |
|                    | imate monthly inc<br>use unless you are                           |                                  | ate you file this form. If y  | you have nothing to r   | eport for             | any I          | ine, write           | s \$0 in the   | space                | . Include your i                        | non-filing            |
|                    | ou or your non-filing<br>e space, attach a s                      |                                  | ore than one employer, co   | ombine the informatio   | n for all e           | mplo           | oyers for            | that perso     | on on th             | ne lines below.                         | If you need           |
|                    |   |                                  |   |   |                       |                | For Del              | otor 1         |                      | Debtor 2 or<br>a-filing spouse          | •                     |
| 2.                 |   |                                  | ry, and commissions (be<br>calculate what the monthl  |   | 2.                    | \$             |                      | 715.15         | \$                   | N/                                      | <b>A</b>              |
| 3.                 | Estimate and lis  | st monthly overti                | me pay.   |   | 3.                    | +\$            |                      | 0.00           | +\$                  | N/.                                     | <u>A</u>              |
| 4.                 | Calculate gross   | Income. Add lin                  | e 2 + line 3.   |   | 4.                    | \$             | 7′                   | 15.15          | \$                   | N/A                                     |                       |

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| Deb | tor 1             | Geraldine Hendricks-Mcccan   |                 | C   | Case       | number (if known     | ) .        |          |                    |                   |                  |
|-----|-------------------|--|-----------------|-----|------------|----------------------|------------|----------|--------------------|-------------------|------------------|
|     |                   |  |                 |     | For        | Debtor 1             |            |          | Debtor<br>filing s |                   |                  |
|     | Сор               | y line 4 here  | 4.              |     | \$         | 715.15               | 5          | \$       |                    | N/A               | _                |
| 5.  | List              | all payroll deductions:  |                 |     |            |                      |            |          |                    |                   |                  |
|     | 5a.               | Tax, Medicare, and Social Security deductions  | 5a              | ١.  | \$         | 127.08               | 3          | \$       |                    | N/A               |                  |
|     | 5b.               | Mandatory contributions for retirement plans   | 5b              |     | <u>*</u> — | 0.00                 |            | \$       |                    | N/A               | _                |
|     | 5c.               | Voluntary contributions for retirement plans   | 5c              |     | \$         | 0.00                 | _          | \$       |                    | N/A               | _                |
|     | 5d.               | Required repayments of retirement fund loans   | 5d              | l.  | \$         | 0.00                 | _          | \$       |                    | N/A               | _                |
|     | 5e.               | Insurance  | 5e              | ٠.  | \$_        | 0.00                 |            | \$       |                    | N/A               | _                |
|     | 5f.               | Domestic support obligations   | 5f.             |     | \$         | 0.00                 | )          | \$       | -                  | N/A               | _                |
|     | 5g.               | Union dues   | 5g              | ١.  | \$         | 0.00                 | )          | \$       |                    | N/A               | _                |
|     | 5h.               | Other deductions. Specify:   | 5h              | .+  | \$_        | 0.00                 |            | + \$     |                    | N/A               | _                |
| 6.  | Add               | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   | _<br>6.         |     | \$         | 127.08               | 3          | \$       |                    | N/A               | _                |
| 7.  | Calc              | culate total monthly take-home pay. Subtract line 6 from line 4.   | 7.              |     | \$         | 588.07               | 7          | \$       |                    | N/A               | _                |
| 8.  | List<br>8a.       | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.                      | 8a              | ı.  | \$         | 0.00                 | _<br>)     | \$       |                    | N/A               | _                |
|     | 8b.               | Interest and dividends   | 8b              | ١.  | \$         | 0.00                 |            | \$       |                    | N/A               |                  |
|     | 8c.<br>8d.<br>8e. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation Social Security  | 8c.<br>8d<br>8e | ١.  | \$_<br>\$_ | 0.00<br>0.00<br>0.00 | )          | \$<br>\$ |                    | N/A<br>N/A<br>N/A | _                |
|     | 8f.<br>8g.        | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  Pension or retirement income | 8f.<br>8g       |     | \$_<br>\$  | 0.00<br>1,201.00     | _<br>)_    | \$       |                    | N/A<br>N/A        | _                |
|     | 8h.               | Other monthly income. Specify:   | 8h              |     | \$<br>-    | 0.00                 | _          | - :      |                    | N/A               | _                |
|     | 011.              | Cutof monthly moonic. Opening.   | _ '''           | ··- | Ψ_         | 0.00                 | <u>_</u> ' |          |                    | 11//              |                  |
| 9.  | Add               | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | 9.              | \$  | S          | 1,201.00             | )          | \$       |                    | N/A               | 4                |
| 10  | Calc              | culate monthly income. Add line 7 + line 9.  | 10.             | \$  |            | 1,789.07 +           | Φ.         |          | N/A                | = \$              | 1,789.07         |
|     |                   | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   |                 | Ψ_  |            | 1,703.07             | _          |          | IVA                |                   | 1,703.07         |
| 11. | Inclu<br>othe     | e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your refriends or relatives.  Not include any amounts already included in lines 2-10 or amounts that are not a cify:                             | depe            |     |            | •                    |            |          | chedule<br>11.     |                   | 0.00             |
| 12. |                   | the amount in the last column of line 10 to the amount in line 11. The resile that amount on the Summary of Schedules and Statistical Summary of Certainies  |                 |     |            |                      |            |          | 12.                | \$                | 1,789.07         |
| 13  | Dov               | ou expect an increase or decrease within the year after you file this form   | ?               |     |            |                      |            |          | '                  | Combi<br>month    | ned<br>ly income |
| 10. | <b>.</b>          | No.  | •               |     |            |                      |            |          |                    |                   |                  |
|     | $\overline{}$     | Yes Explain:   |                 |     |            |                      |            |          |                    |                   |                  |

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|             |   |                                    |                                       |   |  | Ī               |                   |                               |
|-------------|---|------------------------------------|---------------------------------------|---|--|-----------------|-------------------|-------------------------------|
| Fill        | n this informa                                  | tion to identify yo                | ur case:                              |   |  |                 |                   |                               |
| Debt        | tor 1   | Geraldine He                       | endricks-                             | ·Mcccan   |  |                 | c if this is:     |                               |
| Debt        | tor 2   |                                    |                                       |   |  | _               | An amended filing | wing postpetition chapter     |
| 1           | ouse, if filing)                                | -                                  |                                       |   |  |                 |                   | the following date:           |
| Unite       | ed States Bankı                                 | uptcy Court for the                | : NORTH                               | IERN DISTRICT OF ILLING                                     | OIS                                    | 1               | MM / DD / YYYY    |                               |
| Case        | e number  |                                    |                                       |   |  |                 |                   |                               |
| (lf kr      | nown)   |                                    |                                       |   |  |                 |                   |                               |
| Of          | ficial Fo                                       | rm 106J                            |                                       |   |  |                 |                   |                               |
|             |   | J: Your I                          | <br>Exper                             | ises  |  |                 |                   | 12/15                         |
| Be a        | as complete a<br>rmation. If m<br>nber (if know | and accurate as                    | possible.<br>eded, atta<br>y question | . If two married people ar<br>ch another sheet to this      |  |                 |                   |                               |
| 1.          | Is this a joir                                  |                                    | noia                                  |   |  |                 |                   |                               |
|             | ■ No. Go to                                     | o line 2.<br>es Debtor 2 live i    | in a separ                            | ate household?  |  |                 |                   |                               |
|             | ss. 2 ss  |                                    |                                       |   |  |                 |                   |                               |
|             | ΠY  | es. Debtor 2 mus                   | st file Offici                        | al Form 106J-2, <i>Expenses</i>                             | for Separate House                     | ehold of Debto  | or 2.             |                               |
| 2.          | Do you have                                     | e dependents?                      | ■ No                                  |   |  |                 |                   |                               |
|             | Do not list D<br>Debtor 2.                      | ebtor 1 and                        | ☐ Yes.                                | Fill out this information for each dependent                | Dependent's relat<br>Debtor 1 or Debto |                 | Dependent's age   | Does dependent live with you? |
|             | Do not state                                    | the                                |                                       |   |  |                 |                   | □ No                          |
|             | dependents                                      | names.                             |                                       |   |  |                 |                   | Yes                           |
|             |   |                                    |                                       |   |  |                 |                   | □ No<br>□ Yes                 |
|             |   |                                    |                                       |   |  |                 |                   | □ res                         |
|             |   |                                    |                                       |   |  |                 |                   | ☐ Yes                         |
|             |   |                                    |                                       |   |  |                 |                   | □No                           |
|             |   |                                    |                                       |   |  |                 |                   | ☐ Yes                         |
| 3.          |   | enses include<br>f people other th | han                                   | No  |  |                 |                   |                               |
|             |   | d your depender                    |                                       | Yes   |  |                 |                   |                               |
| Part        | 2: Estim  | ate Your Ongoi                     | na Monthi                             | v Evnenses  |  |                 |                   |                               |
| Esti<br>exp | imate your ex                                   | cpenses as of yo                   | our bankrı                            | uptcy filing date unless y<br>y is filed. If this is a supp |  |                 |                   |                               |
|             |   |                                    |                                       | government assistance it sluded it on Schedule I: Y         |  |                 |                   |                               |
| (Off        | icial Form 10                                   | <b>061.)</b>                       |                                       |   |  |                 | Your exp          | enses                         |
| 4.          |   | or home owners                     |                                       | ses for your residence. In                                  | nclude first mortgag                   | e<br>4. \$      |                   | 300.00                        |
|             | If not include                                  | led in line 4:                     |                                       |   |  |                 |                   |                               |
|             | 4a. Real e                                      | estate taxes                       |                                       |   |  | 4a. \$          |                   | 0.00                          |
|             |   | rty, homeowner's                   |                                       |   |  | 4b. \$          |                   | 0.00                          |
|             |   |                                    |                                       | upkeep expenses   |  | 4c. \$          |                   | 0.00                          |
| 5           |   | owner's associat<br>nortgage payme |                                       | dominium dues<br>our residence, such as hoi                 | me equity loans                        | 4d. \$<br>5. \$ |                   | 0.00                          |

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| Debtor 1        | Geraldine Hendricks-Mcccan  | Case num     | ber (if known) |                               |
|-----------------|---|--------------|----------------|-------------------------------|
| 6. <b>Uti</b> l | ities:  |              |                |                               |
| 6a.             | Electricity, heat, natural gas  | 6a.          | \$             | 70.00                         |
| 6b.             | Water, sewer, garbage collection  | 6b.          |                | 0.00                          |
| 6c.             | Telephone, cell phone, Internet, satellite, and cable services  | 6c.          |                | 120.00                        |
| 6d.             |   | 6d.          |                | 0.00                          |
|                 | od and housekeeping supplies  | 7.           | ·              |                               |
|                 | Idcare and children's education costs   |              | · -            | 350.00                        |
|                 |   | 8.           | \$             | 0.00                          |
|                 | thing, laundry, and dry cleaning  | 9.           |                | 50.00                         |
|                 | sonal care products and services  | 10.          |                | 50.00                         |
|                 | dical and dental expenses   | 11.          | \$             | 25.00                         |
|                 | nsportation. Include gas, maintenance, bus or train fare.   | 40           | Φ.             | 450.00                        |
|                 | not include car payments.   | 12.          |                | 150.00                        |
|                 | ertainment, clubs, recreation, newspapers, magazines, and books   | 13.          | ·              | 0.00                          |
| 14. <b>Ch</b> a | aritable contributions and religious donations  | 14.          | \$             | 0.00                          |
| 15. <b>Ins</b>  | urance.   |              |                |                               |
| Do              | not include insurance deducted from your pay or included in lines 4 or 20.  |              |                |                               |
| 15a             | . Life insurance  | 15a.         | \$             | 0.00                          |
| 15b             | . Health insurance  | 15b.         | \$             | 0.00                          |
| 150             | . Vehicle insurance   | 15c.         | \$             | 128.00                        |
| 150             | l. Other insurance. Specify:  | 15d.         | \$             | 0.00                          |
|                 | res. Do not include taxes deducted from your pay or included in lines 4 or 20.  |              |                | 0.00                          |
|                 | ecify:  | 16.          | \$             | 0.00                          |
|                 | tallment or lease payments:   |              | Ψ              | 0.00                          |
|                 | . Car payments for Vehicle 1  | 17a.         | ¢              | 0.00                          |
|                 |   |              | ·              |                               |
|                 | Car payments for Vehicle 2  | 17b.         | Ф              | 0.00                          |
| 1/0             | Other. Specify: Payments for car (not party to finance agreement, o   |              | •              | E02.00                        |
|                 | title)  | 17c.         |                | 582.00                        |
| 17c             | l. Other. Specify:  | 17d.         | \$             | 0.00                          |
|                 | ur payments of alimony, maintenance, and support that you did not report as   |              | _              | 2.22                          |
| ded             | lucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).   | 18.          | \$             | 0.00                          |
| 19. <b>Oth</b>  | er payments you make to support others who do not live with you.  |              | \$             | 0.00                          |
| Spe             | ecify:  | 19.          | -              |                               |
| 20. <b>Oth</b>  | er real property expenses not included in lines 4 or 5 of this form or on Sche  | dule I: Yo   | our Income.    |                               |
| 20a             | . Mortgages on other property   | 20a.         | \$             | 0.00                          |
| 20b             | . Real estate taxes   | 20b.         | \$             | 0.00                          |
| 200             | Property, homeowner's, or renter's insurance  | 20c.         | \$             | 0.00                          |
|                 | l. Maintenance, repair, and upkeep expenses   | 20d.         |                | 0.00                          |
|                 | Homeowner's association or condominium dues   | 20a.<br>20e. | ·              |                               |
|                 |   |              | ·              | 0.00                          |
| 11. <b>O</b> th | er: Specify:  | 21.          | +\$            | 0.00                          |
| 2 Cal           | culate your monthly expenses  |              |                |                               |
|                 | . Add lines 4 through 21.   |              | \$             | 1,825.00                      |
|                 | •   |              | \$             | 1,823.00                      |
|                 | c. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  |              | ·              |                               |
| 220             | Add line 22a and 22b. The result is your monthly expenses.  |              | \$             | 1,825.00                      |
| 2 6             | oulete veur monthly not income  |              |                |                               |
|                 | culate your monthly net income.   | 00-          | Φ.             | 4 700 07                      |
|                 | . Copy line 12 (your combined monthly income) from Schedule I.  | 23a.         | ·              | 1,789.07                      |
| 23b             | Copy your monthly expenses from line 22c above.   | 23b.         | -\$            | 1,825.00                      |
|                 |   |              |                |                               |
| 230             | Subtract your monthly expenses from your monthly income.  | 00-          | œ.             | -35.93                        |
|                 | The result is your monthly net income.  | 23c.         | \$             | -33.33                        |
| For             | you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect your lification to the terms of your mortgage?  No. |              |                | ease or decrease because of a |
|                 | Yes. Explain here:  |              |                |                               |
|                 | 100. Explain flore.   |              |                |                               |

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| Fill in this     | s information to identify your                               | case:                    |                             |                         |   |
|------------------|--|--------------------------|-----------------------------|-------------------------|---|
| Debtor 1         | Geraldine Hendri   | cks-Mcccan               |                             |                         |   |
|                  | First Name   | Middle Name              | Last Name                   |                         |   |
| Debtor 2         |  |                          |                             |                         |   |
| (Spouse if, fili | ing) First Name  | Middle Name              | Last Name                   |                         |   |
| United Sta       | ates Bankruptcy Court for the:                               | NORTHERN DISTRICT        | OF ILLINOIS                 |                         |   |
| Case num         | ber  |                          |                             |                         |   |
| (if known)       |  |                          |                             |                         | ☐ Check if this is an   |
|                  |  |                          |                             |                         | amended filing  |
|                  |  |                          |                             |                         |   |
| Official         | Form 106Dec  |                          |                             |                         |   |
|                  |  | امينامانيناميما          | Dobtorio Co                 | hadulaa                 |   |
| Decia            | aration About a  | <u>ın individual</u>     | Deptor S Sc                 | neaules                 | 12/15   |
| •                | Sign Below   | ,                        |                             |                         |   |
| Did v            | you pay or agree to pay some                                 | eone who is NOT an attor | rney to help you fill out b | ankruptcy forms?        |   |
| _                | No   |                          | , ,,                        |                         |   |
| _                |  |                          |                             |                         |   |
|                  | Yes. Name of person  |                          |                             |                         | nptcy Petition Preparer's Notice,<br>nd Signature (Official Form 119) |
|                  |  |                          |                             | Boolaration, a          | na dignatare (Gindari Gini 119)                                       |
|                  | r penalty of perjury, I declare<br>hey are true and correct. | that I have read the sum | nmary and schedules file    | d with this declaration | and   |
| X /s             | s/ Geraldine Hendricks-Mo                                    | eccan                    | X                           |                         |   |
|                  | Seraldine Hendricks-Mccc                                     |                          | Signature of                | Debtor 2                |   |
| S                | signature of Debtor 1  |                          | -                           |                         |   |
| D                | Pate April 11, 2017  |                          | Date                        |                         |   |
|                  |  |                          |                             |                         |   |

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| Fill in this informati                                     | on to identify you   | r case.  |  |  |   |
|--|--|--|--|--|---|
|  | Geraldine Hendr  |  |  |  |   |
| _  | First Name   | Middle Name  | Last Name  |  |   |
| Debtor 2<br>(Spouse if, filing)                            | First Name   | Middle Name  | Last Name  |  |   |
| United States Bankru                                       |  | NORTHERN DISTRICT (  |  |  |   |
| Officed States Barikit                                     | apicy Court for the.   | NORTHERN DISTRICT  | DI ILLINOIS  |  |   |
| Case number (if known)                                     |  |  |  | _  | heck if this is an mended filing                      |
| Official Form  |  | Affairs for Individ  | duals Filing for B   | ankruntev  | 4/10  |
| Be as complete and information. If more number (if known). | accurate as possi<br>e space is needed,<br>Answer every ques | ble. If two married people a<br>attach a separate sheet to<br>stion.                         | are filing together, both are<br>this form. On the top of an | equally responsible for sup<br>y additional pages, write you | olying correct  |
| Part 1: Give Deta  | ils About Your Ma  | rital Status and Where You   | Lived Before   |  |   |
| 1. What is your cu   | ırrent marital statu   | s?   |  |  |   |
| ☐ Married  |  |  |  |  |   |
| Not married  | i  |  |  |  |   |
| 2. During the last   | 3 years, have you  | lived anywhere other than  | where you live now?  |  |   |
| ■ No<br>□ Yes. List al                                     | of the places you li   | ived in the last 3 years. Do no  | ot include where you live now                                | <i>i</i> .   |   |
| Debtor 1 Prior   | Address:   | Dates Debtor 1 lived there   | Debtor 2 Prior Ac  | ldress:  | Dates Debtor 2<br>lived there                         |
|  |  |  |  | ity property state or territory ico, Texas, Washington and W |   |
| ■ No<br>□ Yes. Make  | sure you fill out <i>Sch</i>                                 | nedule H: Your Codebtors (Of   | fficial Form 106H).  |  |   |
| Part 2 Explain ti  | ne Sources of You  | r Income   |  |  |   |
| Fill in the total ar                                       | nount of income you joint case and you                       | nployment or from operatin<br>u received from all jobs and a<br>have income that you receive | all businesses, including part                               |  | ndar years?   |
|  |  | Debtor 1   |  | Debtor 2   |   |
|  |  | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions)        | Sources of income<br>Check all that apply.                   | Gross income<br>(before deductions<br>and exclusions) |
| From January 1 of the date you filed for                   |  | ☐ Wages, commissions, bonuses, tips  | \$2,142.00   | ☐ Wages, commissions, bonuses, tips                          | ,   |
|  |  | ☐ Operating a business   |  | ☐ Operating a business                                       |   |
| For last calendar ye<br>(January 1 to Dece                 |  | ☐ Wages, commissions, bonuses, tips  | \$10,926.00  | ☐ Wages, commissions, bonuses, tips                          |   |
|  |  | ☐ Operating a business   |  | ☐ Operating a business                                       |   |
| Official Form 107  |  | Statement of Financial Aff   | airs for Individuals Filing for B                            | ankruptcv  | page '  |

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Case number (if known) Document Debtor 1 Geraldine Hendricks-Mcccan

|                               |  |  | Debtor 1   |                                     |   | Debtor 2                                      |                           |   |
|-------------------------------|--|--|--|-------------------------------------|---|---|---------------------------|---|
|                               |  |  | Sources of income<br>Check all that apply.   | (befo                               | ss income<br>ore deductions and<br>usions)  | Sources of inco                               |                           | Gross income<br>(before deductions<br>and exclusions) |
|                               | endar year befo<br>to December 3   |  | ☐ Wages, commissions, bonuses, tips  |                                     | \$3,690.00  | ☐ Wages, complete Disconnection               | missions,                 |   |
|                               |  |  | ☐ Operating a business   |                                     |   | ☐ Operating a b                               | ousiness                  |   |
| Include and other winnings    | income regardle<br>er public benefit<br>s. If you are filin<br>h source and th | ess of wheth<br>payments; pg a joint cas | e during this year or the tweer that income is taxable. Expensions; rental income; into e and you have income that me from each source separ | xamples<br>erest; div<br>t you rece | of other income are a idends; money collectived together, list it contact to the contact in the | ted from lawsuits; in the sound once under De | royalties; and<br>btor 1. |   |
| Ye                            | s. Fill in the deta  | ails.                                    |  |                                     |   |   |                           |   |
|                               |  |  | Debtor 1   |                                     |   | Debtor 2                                      |                           |   |
|                               |  |  | Sources of income<br>Describe below.   | eacl<br>(befo                       | ss income from n source ore deductions and usions)  | Sources of inco<br>Describe below.            |                           | Gross income<br>(before deductions<br>and exclusions) |
|                               | ary 1 of current<br>u filed for bank   |  | SSI  |                                     | \$3,603.00  |   |                           |   |
| For last cale<br>(January 1 t | endar year:<br>to December 3   | 1, 2016 )                                | SSI  |                                     | \$14,412.00   |   |                           |   |
|                               | endar year befo<br>to December 3   |  | SSI  |                                     | \$14,412.00   |   |                           |   |
| Part 3: Li                    | ist Certain Pay  | ments You                                | Made Before You Filed for  | r Bankru                            | ptcy  |   |                           |   |
| 6. Are eith<br>□ No           | . Neither Deb  | otor 1 nor D                             | s debts primarily consume<br>tor 2 has primarily cons<br>personal, family, or househ   | sumer de                            | ebts. Consumer debts  | s are defined in 11                           | U.S.C. § 10°              | 1(8) as "incurred by ar                               |
|                               |  | 0 days befo                              | re you filed for bankruptcy,   | did you p                           | ay any creditor a tota  | l of \$6,425* or mor                          | e?                        |   |
|                               | □ No.  | Go to line 7                             |  |                                     |   |   |                           |   |
|                               |  | paid that cre<br>not include             | ach creditor to whom you pa<br>editor. Do not include payme<br>payments to an attorney for<br>on 4/01/19 and every 3 yea                     | ents for d<br>this banl             | omestic support oblig<br>cruptcy case.  | ations, such as chi                           | ild support a             | nd alimony. Also, do                                  |
| ■ Ye                          | s. Debtor 1 or   | Debtor 2 o                               | r both have primarily cons   | sumer de                            | ebts.   |   |                           |   |
|                               | ■ No.  | Go to line 7                             |  |                                     |   |   |                           |   |
|                               | □ Yes  | List below e include pay                 | ach creditor to whom you paments for domestic support this bankruptcy case.  |                                     |   |   |                           |   |
| Credito                       | or's Name and  | Address                                  | Dates of paym  | nent                                | Total amount  | Amount you still owe                          | Was this p                | payment for   |

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Case number (if known) Document Debtor 1 Geraldine Hendricks-Mcccan

| 7.  | Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. | rtners; relatives of any ger<br>control, or owner of 20% of | neral partners; partne<br>or more of their voting | erships of which<br>g securities; a | ch you are a generand any managing a | al partner; corporations<br>gent, including one for |
|-----|---|---|---|-------------------------------------|--------------------------------------|---|
|     | ☐ Yes. List all payments to an insider.   |   |   |                                     |                                      |   |
|     | Insider's Name and Address  | Dates of payment  | Total amount paid                                 | Amount ye still ov                  |                                      | this payment  |
| 8.  | Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cos   |   | ments or transfer a                               | any property                        | on account of a d                    | ebt that benefited an                               |
|     | <ul><li>■ No</li><li>□ Yes. List all payments to an insider</li></ul>   |   |   |                                     |                                      |   |
|     | Insider's Name and Address  | Dates of payment  | Total amount                                      | Amount ye                           | ou Reason for                        | this payment  |
|     |   | , ,   | paid  | still ov                            |                                      |   |
| Pai | rt 4: Identify Legal Actions, Repossession  | s, and Foreclosures   |   |                                     |                                      |   |
| 9.  | Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.  ■ No □ Yes. Fill in the details.                                 |   |   |                                     |                                      |   |
|     | Case title<br>Case number   | Nature of the case  | Court or agency                                   |                                     | Status of th                         | ie case   |
| 10. | Within 1 year before you filed for bankrupto Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.  Creditor Name and Address                   |   | erty repossessed, f                               |                                     | arnished, attached<br>Date           | Value of the  |
|     |   | Explain what happene  | d   |                                     |                                      | property  |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment beca  ■ No □ Yes. Fill in the details.   |   | luding a bank or fir                              | nancial institu                     | ution, set off any a                 | amounts from your                                   |
|     | Creditor Name and Address   | Describe the action the                                     | e creditor took                                   |                                     | Date action was aken                 | Amount  |
|     | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or all No Yes   |   | erty in the possessi                              |                                     |                                      | efit of creditors, a                                |
| Pa  | t 5: List Certain Gifts and Contributions   |   |   |                                     |                                      |   |
| 13. | Within 2 years before you filed for bankrup  ■ No  □ Yes. Fill in the details for each gift.  | tcy, did you give any gift                                  | s with a total value                              | of more than                        | ı \$600 per person'                  | ?   |
|     | Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift and  | Describe the gifts  |   |                                     | Dates you gave<br>he gifts           | Value   |
|     | Address:  |   |   |                                     |                                      |   |

Document Page 33 of 46 Case number (if known) Debtor 1 Geraldine Hendricks-Mcccan 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No п Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of **Address** transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You \$335 filing fee, \$10 copy costs, \$40 Swanson & Desai, LLC 3/30/2017 \$385.00 2314 W North Ave Unit C-1W credit report Chicago, IL 60647 kswanson@swansondesai.com **Access Counseling** \$15.00 633 W 5th Street Suite 26001 Los Angeles, CA 90071 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

Person Who Was Paid Address

Description and value of any property transferred

Date payment or transfer was made

Amount of payment

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Debtor 1 Geraldine Hendricks-Mcccan

| 18. | Within 2 years before you filed for bankrupt transferred in the ordinary course of your be include both outright transfers and transfers mainclude gifts and transfers that you have alread No  | usiness or financial affa<br>ade as security (such as         | airs?<br>the granting of a |             |   |   |
|-----|---|---|----------------------------|-------------|---|---|
|     | Yes. Fill in the details.  Person Who Received Transfer Address   | Description and property transfer                             |                            | paymo       | ibe any property or<br>ents received or debts<br>n exchange   | Date transfer was made                        |
|     | Person's relationship to you  |   |                            | para        | n oxonango  |   |
| 19. | Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro   |   | ny property to a           | self-settle | d trust or similar device o                                   | of which you are a                            |
|     | Yes. Fill in the details.   |   |                            |             |   |   |
|     | Name of trust   | Description and   | value of the pro           | perty trans | sferred   | Date Transfer was made                        |
|     | t 8: List of Certain Financial Accounts, Ins  | -   |                            | _           |   |   |
| 20. | Within 1 year before you filed for bankruptc sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, associated in the same series of the savings of | or other financial accou                                      | nts; certificates          | of deposi   |   |   |
|     | ■ No □ Yes. Fill in the details.  |   |                            |             |   |   |
|     | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  | Last 4 digits of account number                               | Type of acco               | unt or      | Date account was<br>closed, sold,<br>moved, or<br>transferred | Last balance<br>before closing or<br>transfer |
| 21. | Do you now have, or did you have within 1 y cash, or other valuables?   | year before you filed fo                                      | r bankruptcy, a            | ny safe dep | posit box or other deposi                                     | tory for securities,                          |
|     | ■ No<br>□ Yes. Fill in the details.   |   |                            |             |   |   |
|     | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)   | Who else had acc<br>Address (Number, S<br>State and ZIP Code) |                            | Describe    | the contents  | Do you still have it?                         |
| 22. | Have you stored property in a storage unit o  | or place other than you                                       | r home within 1            | year befor  | e you filed for bankrupto                                     | ey?   |
|     | ■ No □ Yes. Fill in the details.  |   |                            |             |   |   |
|     | Name of Storage Facility Address (Number, Street, City, State and ZIP Code)   | Who else has or to it? Address (Number, State and ZIP Code)   |                            | Describe    | the contents  | Do you still have it?                         |
| Pai | t 9: Identify Property You Hold or Control  | for Someone Else  |                            |             |   |   |
| 23. | Do you hold or control any property that so for someone.  | meone else owns? Incl   | ude any proper             | ty you bor  | rowed from, are storing f                                     | or, or hold in trust                          |
|     | ■ No □ Yes. Fill in the details.  |   |                            |             |   |   |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)  | Where is the prop<br>(Number, Street, City, S<br>Code)        |                            | Describe    | the property  | Value   |
| Pai | t 10: Give Details About Environmental Info   | ormation  |                            |             |   |   |
| For | the purpose of Part 10, the following definition  | ons apply:  |                            |             |   |   |

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5 Case 17-11374 Doc 1 Filed 04/11/17 Entered 04/11/17 09:32:46 Desc Main Page 35 of 46
Case number (if known) Document

Debtor 1 **Geraldine Hendricks-Mcccan** 

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

| Report all notices, releases, and proceedings that you know about, regardless of when they occurred.  24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of the No Yes. Fill in the details. | of an environmental law?                           |
|---|--|
| ■ No □ Yes. Fill in the details.  | of an environmental law?                           |
| Yes. Fill in the details.   |  |
| Name of site  |  |
| Name of site Address (Number, Street, City, State and ZIP Code)  Governmental unit Address (Number, Street, City, State and ZIP Code)  Environmental late know it ZIP Code)   | w, if you Date of notice                           |
| 25. Have you notified any governmental unit of any release of hazardous material?   |  |
| ■ No □ Yes. Fill in the details.  |  |
| Name of site  Address (Number, Street, City, State and ZIP Code)  Governmental unit  Address (Number, Street, City, State and ZIP Code)  Environmental late know it know it   | w, if you Date of notice                           |
| 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include   | de settlements and orders.                         |
| ■ No<br>□ Yes. Fill in the details.   |  |
| Case Title Court or agency Nature of the case Name Address (Number, Street, City, State and ZIP Code) Nature of the case  | Status of the case                                 |
| Part 11: Give Details About Your Business or Connections to Any Business  |  |
| 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following con   | nections to any business?                          |
| ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part  | t-time   |
| ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)  |  |
| ☐ A partner in a partnership  |  |
| ☐ An officer, director, or managing executive of a corporation  |  |
| ☐ An owner of at least 5% of the voting or equity securities of a corporation   |  |
| No. None of the above applies. Go to Part 12.   |  |
| ☐ Yes. Check all that apply above and fill in the details below for each business.  |  |
| 1 7   | fication number<br>Social Security number or ITIN. |
| (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Dates business  | existed  |
| 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your institutions, creditors, or other parties.  | business? Include all financial                    |
| ■ No □ Yes. Fill in the details below.  |  |
| Name Address (Number, Street, City, State and ZIP Code)   |  |

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6 Case 17-11374 Doc 1 Filed 04/11/17 Entered 04/11/17 09:32:46 Desc Main Page 36 of 46
Case number (if known) Document

Debtor 1 Geraldine Hendricks-Mcccan

| /s/ Geraldine Hendricks-Mcccan                      |  |                                 |
|---|--|---------------------------------|
| Geraldine Hendricks-Mcccan<br>Signature of Debtor 1 | Signature of Debtor 2  |                                 |
| Date _April 11, 2017                                | Date   |                                 |
|   | Date<br>ment of Financial Affairs for Individuals Filing for E | Bankruptcy (Official Form 107)? |
| No  |  |                                 |
| □Yes  |  |                                 |

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Debtor 1  | Coroldina Handrialia  | Massar  |   |   |
|---|---|---|---|---|
| Deplor 1  | Geraldine Hendricks- First Name   | -IVICCCAN<br>Middle Name  | Last Name   |   |
| Debtor 2  |   |   |   |   |
| Spouse if, filing)  | First Name  | Middle Name   | Last Name   |   |
| nited States Ba   | ankruptcy Court for the: NO   | ORTHERN DISTE   | RICT OF ILLINOIS  |   |
| ase number  |   |   |   |   |
| known)  |   |   |   | ☐ Check if this is an   |
|   |   |   |   | amended filing  |
| ou must file th   | sed personal property and t<br>is form with the court within  |   |   |   |
| on the<br>two married po<br>sign and<br>as complete   | ever is earlier, unless the co<br>form<br>eople are filing together in a<br>nd date the form.   | ourt extends the a joint case, both f more space is i               | rou file your bankruptcy petition or by the date set time for cause. You must also send copies to the h are equally responsible for supplying correct inf needed, attach a separate sheet to this form. On the  | creditors and lessors you lis   |
| on the two married posign and e as complete write y  Part 1: List Y  For any credit information b   | ever is earlier, unless the conform  eeople are filing together in a nd date the form.  and accurate as possible. If your name and case number our Creditors Who Have Sectors that you listed in Part 1   | ourt extends the a joint case, both f more space is a r (if known). | time for cause. You must also send copies to the hare equally responsible for supplying correct infineeded, attach a separate sheet to this form. On the Creditors Who Have Claims Secured by Property What do you intend to do with the property that  | creditors and lessors you list ormation. Both debtors must ne top of any additional page (Official Form 106D), fill in the  |
| on the two married posign and as complete write y  art 1: List Y  For any credit information b  | ever is earlier, unless the conform  seeple are filing together in a seeple are filing together.  Seeple are filing together in a seeple are filing together in a seeple are filing together. | ourt extends the a joint case, both f more space is a r (if known). | time for cause. You must also send copies to the hare equally responsible for supplying correct infineeded, attach a separate sheet to this form. On the Creditors Who Have Claims Secured by Property  | creditors and lessors you list ormation. Both debtors must ne top of any additional page (Official Form 106D), fill in th   |
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| on the two married posign and a seas complete write y Part 1: List Y  For any credit information boldentify the creditor's name:  Description of property                               | ever is earlier, unless the conform  eeople are filing together in a nd date the form.  and accurate as possible. If your name and case number our Creditors Who Have Settors that you listed in Part 1 selow.  reditor and the property that is  | ourt extends the a joint case, both f more space is a r (if known). | time for cause. You must also send copies to the hare equally responsible for supplying correct infineeded, attach a separate sheet to this form. On the Creditors Who Have Claims Secured by Property What do you intend to do with the property that secures a debt?  Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | creditors and lessors you list ormation. Both debtors must ne top of any additional page (Official Form 106D), fill in the Did you claim the properties exempt on Schedule          |
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| on the two married posign and a seas complete write y  Part 1: List Y  For any creditinformation book indentify the creditor's name:  Description of property securing debt  Creditor's | ever is earlier, unless the conform  eeople are filing together in a nd date the form.  and accurate as possible. If your name and case number our Creditors Who Have Settors that you listed in Part 1 selow.  reditor and the property that is  | ourt extends the a joint case, both f more space is a r (if known). | time for cause. You must also send copies to the hare equally responsible for supplying correct infineeded, attach a separate sheet to this form. On the Creditors Who Have Claims Secured by Property What do you intend to do with the property that secures a debt?  Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | creditors and lessors you list ormation. Both debtors must ne top of any additional page (Official Form 106D), fill in the Did you claim the properties exempt on Schedule  No Yes  |

Official Form 108

Creditor's

securing debt:

Description of

securing debt:

Creditor's

name:

property

Statement of Intention for Individuals Filing Under Chapter 7

 $\square$  Surrender the property.

☐ Surrender the property.

 $\hfill\square$  Retain the property and redeem it.

 $\hfill\square$  Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

☐ No

☐ Yes

☐ No

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| Debtor 1 Geraldine Hendricks-Mcccan                                     | Case number (  | Case number (if known)                   |  |  |
|---|--|--|--|--|
| name:  Description of   | <ul> <li>□ Retain the property and redeem it.</li> <li>□ Retain the property and enter into a Reaffirmation Agreement.</li> </ul>  | ☐ Yes                                    |  |  |
| property securing debt:   | ☐ Retain the property and [explain]:   |  |  |  |
| n the information below. Do not list real estate le                     | / Leases / Leases / Leases / Leases / Leases in Schedule G: Executory Contracts and Uneases. Unexpired leases are leases that are still in efform the contract of the contract | ect; the lease period has not yet ended. |  |  |
| Describe your unexpired personal property leas                          | es   | Will the lease be assumed?               |  |  |
| Lessor's name: Mark Holden  |  | □ No                                     |  |  |
| Description of leased lease for residence Property:  Part 3: Sign Below |  | ■ Yes                                    |  |  |
|   | icated my intention about any property of my estate t  | hat secures a debt and any personal      |  |  |
| Geraldine Hendricks-Mcccan Signature of Debtor 1                        | Signature of Debtor 2  |  |  |  |
| Date <b>April 11, 2017</b>  | Date   |  |  |  |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-11374 Doc 1 Filed 04/11/17 Entered 04/11/17 09:32:46 Desc Main Document Page 43 of 46

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

| In re  | Geraldine He                             | ndricks-Mcccan                                  |   |   | Case No.     |  |
|--------|--|---|---|---|--------------|--|
|        |  |   | Debt  | or(s)                                     | Chapter      | 7                                      |
|        | DIS                                      | SCLOSURE O                                      | F COMPENSATION (  | OF ATTORNEY                               | FOR DI       | EBTOR(S)                               |
| C      | ompensation paid t                       | o me within one yea                             | Bankr. P. 2016(b), I certify that r before the filing of the petition contemplation of or in connection | in bankruptcy, or agree                   | d to be paid | to me, for services rendered or to     |
|        | For legal service                        | es, I have agreed to                            | accept  | \$  |              | 990.00                                 |
|        | Prior to the fili                        | ng of this statement                            | I have received   | \$  |              | 0.00                                   |
|        | Balance Due                              |   |   | \$  |              | 990.00                                 |
| 2. T   | The source of the co                     | mpensation paid to                              | me was:   |   |              |  |
|        | Debtor                                   | ☐ Other (speci                                  | fy):  |   |              |  |
| 3. T   | The source of comp                       | ensation to be paid t                           | o me is:  |   |              |  |
|        | Debtor                                   | ☐ Other (speci                                  | fy):  |   |              |  |
| 4.     | I have not agree                         | d to share the above                            | -disclosed compensation with an   | y other person unless th                  | ey are mem   | bers and associates of my law firm     |
| [      |  |   | closed compensation with a pers   |   |              | or associates of my law firm. A ached. |
| 5. I   | n return for the abo                     | ve-disclosed fee, I l                           | ave agreed to render legal service  | e for all aspects of the b                | ankruptcy o  | case, including:                       |
| b<br>c | . Preparation and                        | filing of any petition<br>f the debtor at the n | nation, and rendering advice to the schedules, statement of affairs eeting of creditors and confirma    | and plan which may be                     | required;    |  |
| 6. B   | By agreement with                        | he debtor(s), the abo                           | ove-disclosed fee does not includ   | e the following service:                  |              |  |
|        |  |   | CERTIFICA   | TION                                      |              |  |
|        | certify that the forankruptcy proceeding |   |   |   | to me for r  | representation of the debtor(s) in     |
| Ar     | oril 11, 2017                            |   | /s/ Jo  | oseph F Lentner                           |              |  |
|        | ate                                      |   | Jose  | ph F Lentner                              |              |  |
|        |  |   |   | nture of Attorney nson & Desai, LLC       |              |  |
|        |  |   |   | W North Ave Unit C                        | -1W          |  |
|        |  |   | Chic  | ago, IL 60647                             |              |  |
|        |  |   |   | 666-7882   Fax: 312-6<br>anson@swansondes |              |  |
|        |  |   |   | anson@swansondes<br>e of law firm         | ai.com       |  |

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## **United States Bankruptcy Court**Northern District of Illinois

|       |  | 1 (of the H District of Himos   |               |                           |
|-------|--|---|---------------|---------------------------|
| In re | Geraldine Hendricks-Mcccan                 |   | Case No.      |                           |
|       |  | Debtor(s)   | Chapter       | 7                         |
|       | VE   | RIFICATION OF CREDITOR MA   | ГRIX          |                           |
|       |  | Number of Ci  | reditors: _   | 12                        |
|       | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of creditor                                     | s is true and | correct to the best of my |
| Date: | April 11, 2017                             | /s/ Geraldine Hendricks-Mcccan Geraldine Hendricks-Mcccan Signature of Debtor |               |                           |

Americash 17340 Torrence Ave Lansing, IL 60438

Capital Accounts Po Box 140065 Nashville, TN 37214

Credit Bureau Services 1244 Jackson Street Alexandria, LA 71301

Custom Coll Srvs Inc 55 E 86th Ave Ste A Merrillville, IN 46410

Custom Coll Srvs Inc Ccsi/Attn Bankruptcy Po Box 10428 Merrillville, IN 46411

Debt Recovery Solution 900 Merchants Concourse Westbury, NY 11590

Debt Recovery Solution Attention: Bankruptcy 6800 Jericho Turnpike Ste 113e Syosset, NY 11791

First South Western Fn 1845 W 4400 S Ste B2 Roy, UT 84067

Ford Motor Credit Co 1 american rd Dearborn, MI 48126

L Fish Furniture 801 E washington st Indianapolis, IN 46219

Mercantile National Bank of IN 7227 Calumet Ave Hammond, IN 46324

Tech Federal Credit Union 10951 Broadway Crown Point, IN 46307